APPLICATION FOR TEAM BUILDING WORKSHOP

State of California Department of Justic COMMISSION ON PEACE OFFICER STANDARDS AND TRAINING 1601 Alhambra Boulevard Sacramento, California 95816-7083

	Agency Name:	
2.	Department Head Name:	
3.	Address:	
4.	Telephone:	
5.	Agency Contact Name and Rank:	
6.	Agency Contact Telephone:	
7.	7. I plan to work on the following topics in this workshop:	
	(Use additional pages if necessary)	
8.	3. I expect this workshop to produce the following results:	
	(Use additional pages if necessary)	
9.	9. This workshop is necessary to accomplish the work described above because:	
	(Use additional pages if necessary)	
10. The last POST TBW this agency used was in		
	Month/Year	

11. The following actions have resulted from the last POST TBW:		
	(Use additional pages if necessary)	
12. I plan to include the following individ	luals in this workshop (name and rank/title):	
1.	11.	
2.	12.	
3.	13.	
4.	14.	
5.	15.	
6.	16.	
7.	17.	
8.	18.	
9.	19.	
10.		
POST reimbursement is limited to a maximum of 19 participants.		
I request approval for a POST-certified Team Building Workshop during the fiscal year beginning July 1,, for the reasons described above.		
I understand that I must comply wit reimbursement for this workshop.	h existing POST Team Building Workshop program guidelines in order to receive	
	Agency Head (Chief of Police or Sheriff)	